



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Michael F. Roberts et al.  
Serial No. : 10/036,022  
Filed : December 26, 2001  
Title : GUM-MASSAGING ORAL  
BRUSH

Art Unit : 1744  
Examiner : M. Spisich  
Confirmation No.: 2417  
Notice of Allowance Date: October 21, 2003

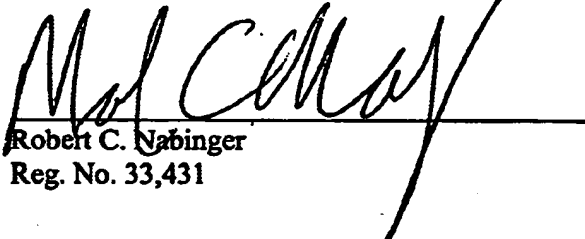
**MAIL STOP ISSUE FEE**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed October 21, 2003, enclosed are a completed issue fee transmittal form PTOL 85b and a check for \$1660 for the required issue fee and publication fee, including patent copies

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

  
Robert C. Nabinger  
Reg. No. 33,431

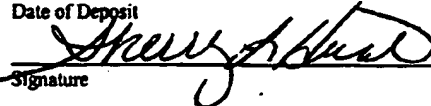
Date: October 28, 2003

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October 28, 2003  
Date of Deposit  
  
Signature  
Sherry L. Hunt  
Typed or Printed Name of Person Signing Certificate

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26161 7590 10/21/2003

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**Sherry L. Hunt** (Depositor's name)  
*Sherry L. Hunt* (Signature)  
**October 28, 2003** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/036,022 12/26/2001 Michael Roberts 03216-3C9004 2417

**TITLE OF INVENTION: GUM-MASSAGING ORAL BRUSH**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1330 \$300 \$1630 01/21/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
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SPISICH, MARK 1744 015-167100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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2 \_\_\_\_\_  
3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Gillette Canada Company**

**Halifax, Nova Scotia CANADA**

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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☒ Publication Fee

☒ Advance Order - # of Copies **Ten (10)**

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(Date)

**October 28, 2003**

10/31/2003 SSESHE2 00000071 10036022

01 FC:1501

02 FC:6001

03 FC:1504

1330.00 OP

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